BEST AVAILABLE COPY

Effective October 1, 2001											
CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN (Column 1) (Column 2) TYPE C OR SMALL ENTITY											
TOTAL CLAIMS	22				- 1	RATE	FEE	1	RATE	FEE	
FOR	NUMBER FILED		NUMB	ER EKTRA		BASIC FEE	370.00	OR	BASEC FEE	740.00	
TOTAL CHARGEABLE CLAIMS		2.2 minus 20=		• 2			X3.9=		OR	X\$18=	36
INDEPENDENT CLAIMS		42/ minus 3 =		. 9			X42=		1	XB4=	-
MULTIPLE DEPENDENT CLAIM PRESENT								-	OR		
							+140=		RO	+280=	
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL	لـــــــــــــــــــــــــــــــــــــ	OR	TOTAL	776
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								ENTITY	OR	OTHER SMALL	ENTITY
Total Independent	CLAMS REMAINING AFTER AMENDMENT		MGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total	• ./3	Minus	••		-		X\$ 9-		OA	X\$18=	
	. 2.	Minus	iet		·		X42-		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140a		OR	+280=	
10/05							TOVAL ADDIT FEE	 	OR	TOTAL	
(Column 2) (Column 3)								L	jon	ADDIT. FEE	
	CLAMS		HIGHEST			ול		ADDI-	1		ADDI-
	REMAINING AFTER AMENDMENT			OUSLY	PRESENT		RATE	TIONAL FEE		RATE	TIONAL
STATE OF THE STATE	. 15	Minus	- 0	10	-05		X\$ 9.	1 1 1 1	OR	X\$18=	
Independent	•	ويدشا		3	=(X	1	X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											
Non-complaint							+140-		ОЯ	+280=	1
Stule on compliant							ADOM: FEE		OR	ADDIT, FEE	0
3/11/15	(Column 1)	7071-1	COU	mn 2)	(Cotumn 3)	4					
CENT C	REMAINING AFTER AMENICATEUR		NIAM PREVI	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total	•	Mays			:	11	X\$ 9=		OR	X\$18=	
Total Independent	. 0	Mana	7		•					X84=	
FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	CLAIM]	X42-		OR	~~~	=
							1140-		OR	+280=	
* If the pary is column 1 in 1 as then the entry in column 2, write "O" in column 3. — If th "Righest Number Previously Paid For" IN THIS SPACE is less than 20, order "20." — If Total Aport, FEE A											
"I De Tiches N.	other Pr viously Pe ober Previously Pe	and For' IN TH	is space i	is less tha	n S. enter "J."			propriate bo			

Application or Docket Number